Volume 6| Fall-Winter 2018



The Check-Up

Your Arizona Medical Board (AMB) E-Newsletter

Happy Holidays from the staff at the Arizona Medical Board!



Photography by fotosmithusa.com - borrowed with permission 12-07-2018

Receive Notice of a CME Audit? - Here are Some Tips

When you receive notice that the AMB is auditing your continuing medical education (CME), there are some key points to keep in mind:

- In order to maintain a valid medical license in the State of Arizona, per Arizona
 Administrative Code (A.A.C.) R4-16-102, licensees are required to complete at least forty
 (40) hours of CME in the two calendar years preceding their renewal.
- Please refer to Arizona Revised Statute (A.R.S.) 32-1434, A.R.S. 32.3248.02 and A.A.C. R4-16-102 to identify statutorily approved CME activities.
- Effective 4/26/18, All MD's with a valid DEA registration number who are renewing a license are required to complete 3 hours of CME related to the safe prescribing of opioids as part of the total 40 hours.

5 Facets of Physician Burnout



Physician burnout is often attributed to systemic problems in the health care environment. Being buried in paperwork, overbearing caseloads and EHRs are just some of the components preventing physicians from practicing medicine the way they would like to. Over 40% of physicians said they were burned out in Medscape's 2018 National Physician Burnout & Depression Report.

To assess physician burnout, many studies use a version of the Maslach Burnout Inventory (MBI), which measures three characteristics: emotional exhaustion, depersonalization and low personal accomplishment.

A recent JAMA review highlighted the difficulty of assessing the accurate number of burned-out physicians without a standard definition of burnout or method of measuring it, though a related JAMA editorial noted that chronic occupational stress is clearly a serious problem among today's physicians.

Burnout starts in medical school

Burnout is also a problem among today's medical students, which suggests that systemic change is required in medical schools as well. "The data shows that burnout starts before students get to residency. It's important to start being proactive in medical school," says Steven Gates, DO, vice president of graduate medical education at Corpus Christi Medical Center-Bay Area in Texas. Preventing and recovering from burnout are individual journeys.

Here are 5 things to keep in mind about burnout.

1. There are different types of burnout

A study from the Journal of Graduate Medical Education classifies burnout in two categories: circumstantial, or rooted in environmental issues, and existential, or rooted in uncertainty about one's role as a physician. The study authors concluded that categorizing burnout might help identify better interventions and recovery options.

Recovery from circumstantial burnout tended to involve actions such as resolving workplace challenges, nurturing one's personal life and taking more time off of work, while recovery from existential burnout tended to involve talking about it, connecting with patients and colleagues, and redefining one's professional identity.

2. Many people don't want to talk about burnout

There's a myth that physicians are expected to be perfect, says Tami Hendriksz, DO, the associate

dean of clinical education at Touro University College of Osteopathic Medicine-CA. "It's hard for students to reach out if they feel like they're the only one struggling and getting help," Dr. Hendriksz says. Dr. Gates believes estimates of physician burnout are under reported.

"A lot of people try to hide it," Dr. Gates says. "They don't wear a sign that says, 'I'm burned out.' "
Nicolet Finger, OMS III, took a leadership role in the group MIND (Mentality Initiative to Nurture Doctors) at the University of North Texas Health Science Texas College of Osteopathic Medicine. At first, the group wasn't very popular because people didn't like talking about their emotions, she said. She and a friend stood up in front of classrooms and talked about mental health, which in turn helped others share.

"I shared my personal struggles of feeling inadequate and it was a chain reaction of people sharing their vulnerabilities," Finger says. "I told a classroom full of students that I laid on my couch for two hours a day the first year of medical school and questioned if this was really for me."

3. Not everyone recovers the same

Addressing chronic occupational stress requires an individualized approach.

"Ten minutes of meditation a day isn't going to help everyone," Dr. Hendriksz says. "We don't do as good of a job customizing our medical training for each of our learners." Take a step back and remember what used to make you happy before medical school, Finger suggests. It's easy for hobbies to fall by the wayside and to only focus on medical school or practicing, but it's critical to make the time, she says.

"We lose our hobbies that we came into medical school with," Finger says. "We see the number we got on a test and it seems to matter more than everything else, and we sacrifice our happiness."

4. Looking at the big picture

Physicians experiencing chronic occupational stress are less likely to identify medicine as a calling, according to Mayo Clinic Proceedings. Keeping focused on a core identity is crucial to fighting against a low sense of personal achievement, a symptom of burnout, Dr. Hendriksz says. She suggests medical students write a letter to their future selves about the type of physicians they want to become. "In those moments when it feels as if medicine is becoming pointless, pull it out and read it as a reminder of everything you have accomplished and how you want to practice medicine," Dr. Hendriksz says.

5. Mentors make a difference

In the Meaningful Medicine Mentoring Program at Marian University College of Osteopathic Medicine, first-year students are matched up with a physician mentor to foster resilience through relationships and role modeling.

Sometimes mentees enroll in the program and request specific characteristics in mentors related to personal experiences. For example, a student might want to be paired with a mentor who has a family to learn from a role model with experience balancing medicine and family.

"Role modeling and demonstrating gratitude in daily work and finding deeper purpose in serving patients is a key part of resilience," Emily Young, MD, co-director of the program, says.

Borrowed, with permission: The DO, September 26, 2018, Article written by Ashley Altus Visit their website



Outside Medical Consultants: Your Profession Needs YOU

The physician community needs physicians to review cases for the AMB as outside medical consultants ("OMCs"). OMCs are professionals who receive a stipend and may be eligible for continuing medical education credits for their review of cases.

We need Arizona licensed physicians in ALL specialties, but there is presently a high need for the following:

- Psychiatry
- Internal Medicine
- Family Medicine
- Pain Management

Please contact us at omc@azmd.gov for details, or



Bureau of Vital Records - Database Application for Vital Events (DAVE) is LIVE:

The Arizona Department of Health Services - Bureau of Vital Records implemented the DAVE system as of October 2nd 2017. DAVE is a web-based electronic system that allows Medical Certifiers, Medical Examiners, Tribal Law Enforcement Authority, Hospitals and Funeral Homes to complete the death record process 100% electronically.

If you need assistance accessing DAVE or have system related question, please call our help desk at (602) 364-2230 or email us at: <u>BVRSupport</u>

Please also visit the DAVE information website for updates, training guides and available webinar sessions: <u>Bureau of Vital Records - Database Application for Vital Events (DAVE)</u>



Mary Bober, Board Operations Manager, is in the Spotlight in this issue.

Mary joined the AMB in January of 2006. She was initially hired to work in Public Records. Thereafter, Mary was promoted to Board Coordinator, Executive Assistant to the Director and lastly, Board Operations Manager.

Mary is the epitome of cool. She brought balance and calm to the sometimes acrimonious process and served the citizens of Arizona well.

Mary retired from State service December 1, 2018. She was an exceptional employee and the AMB will miss her. We wish her health and happiness in her well deserved retirement.

Take the Poll Below: Treating Concussions

In cooperation with the Department of Health Services, the Board is seeking available information regarding the Arizona physician workforce's ability to treat and manage concussions. This information is requested as part of the concussion management pilot program established pursuant to Section 3 of House Bill 2088 - Section 3.

This poll is voluntary and completely confidential.

Do you possess the medical knowledge to diagnose and treat concussions?

Yes

Select

No	Select
Are you able to provide emergency response for treatment of concussions? Yes	Select
No	Select
Have you received any specialized training in the management and treatment of concur. Yes	ssions? Select
No	Select
If yes, are you Board Certified?	Select
Other	Select
What is your practice setting? Emergency Department	Select
Other Hospital Department	Select
Private Practice	Select
Pediatrician	Select
Sports Medicine	Select

Upcoming AMB Meetings

January 10, 2019 - Special Teleconference Meeting
February 4-5, 2019 - Regular Session Meeting
March 7, 2019 - Special Teleconference Meeting
April 15-16, 2019 - Regular Session Meeting

please consult AMB Website for meeting and other Agency information